AMENDMENTS TO THE CLAIMS

Following is a complete set of claims as amended with this Response. This complete set of claims excludes cancelled claims 15 and 20 and includes amended claims 16-19, 21-25, 27, and 30-32.

- 1-14. (Previously Cancelled)
- (Cancelled)
- (Currently Amended) An implantable cardiac device as recited in claim
 [15] 17, wherein the circuitry comprises at least one of an activity sensor, an accelerometer, and a respiration sensor to sense the condition indicative of non-reset.
- (Currently Amended) An implantable cardiac device as resited in claim
 45, An implantable cardiac device comprising:

circuitry to sense whether a patient is in intrinsic rhythm when transitioning from a less upright posture to a more upright posture; and

a processor to promote vasoconstrictive response of the patient's heart by:

- (i) in an event that the circuitry senses the patient is not in intrinsic rhythm, applying increased pacing to counter effects of orthostatic hypotension caused by the transition from the less upright posture to the more upright posture; and
- (ii) in an event that the circuitry senses the patient is in intrinsic rhythm, disabling increased pacing for a programmed duration, wherein the programmed duration is approximately 5-120 seconds.

- (Currently Amended) An implantable cardiac device as recited in claim
 [15] 17, wherein the increased pacing is applied according to an orthostatic response algorithm.
- (Currently Amended) An implantable cardiac device as recited in claim
 [15] 17, wherein the processor applies increased pacing after the programmed duration expires.
 - 20. (Cancelled)
- 21. (Currently Amended) An implantable cardiac device as recited in claim 29. An implantable cardiac device comprising:

detection means for detecting whether a patient is in intrinsic rhythm when transitioning from a first posture to a second posture, where the second posture is more upright than the first posture; and

responsive to the transition in posture, compensation means for temporarily disabling, for a programmed duration, application of increased pacing to counter effects of orthostatic hypotension if the patient is in intrinsic rhythm and subsequently applying, after expiration of the programmed duration, a pacing therapy:

wherein the programmed duration is approximately 5-120 seconds.

- (Currently Amended) An implantable cardiac device as recited in claim
 (20] 21, wherein the compensation means applies a pacing therapy that includes increased pacing.
- (Currently Amended) An implantable cardiac device as recited in claim
 [20] 21, wherein the compensation means applies a pacing therapy that includes decreased pacing.

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- (Currently Amended) An implantable cardiac device as recited in claim
 [20] 21, wherein the compensation means applies increased pacing without delay if the patient is not in intrinsic rhythm.
- 25. (Currently Amended) An implantable cardiac device having a memory and a processor, the cardiac device being programmed to perform tasks comprising countering orthostatic hypotension by disabling, for a programmed duration, application of increased pacing to a patient who is in intrinsic rhythm when transitioning from a first posture to a second posture that is more upright than the first posture, the programmed duration being approximately 5-120 seconds.
- 26. (Original) An implantable and programmable cardiac device as recited in claim 25, further programmed to perform tasks comprising subsequently applying the increased pacing after the programmed duration lapses.
- (Currently Amended) A method implemented by an implantable cardiac device, comprising:

sensing when a patient transitions from a less upright posture to a more upright posture; and

disabling increased pacing responsive to the transition if the patient's heart is in intrinsic rhythm to promote a vasoconstrictive response, wherein said disabling is for a programmed duration, and wherein the programmed duration is approximately 5-120 seconds.

- 28. (Original) A method as recited in claim 27, wherein the sensing comprises monitoring at least one of a respiration-related parameter, an activity variance, or a position-related parameter.
- (Original) A method as recited in claim 27, wherein the sensing comprises determining when the patient, who is at rest, exhibits indicia of non-rest.
- (Currently Amended) A method as recited in claim 27, wherein said disabling is for a programmed duration, and further comprising administering increased pacing after expiration of the programmed duration.
- (Currently Amended) A method as recited in claim 27, wherein said disabling is for a programmed duration, and further comprising administering decreased pacing after expiration of the programmed duration.
- (Currently Amended) A method comprising: when a patient is at rest, determining whether the patient's heart is in intrinsic rhythm;

detecting a condition indicative of non-rest:

if the patient's heart is not in intrinsic rhythm, administering increased pacing upon detection of the condition to counter effects of orthostatic hypotension; and

if the patient's heart is in intrinsic rhythm, disabling administration of the increased pacing for a programmed duration to promote vasoconstrictive response of the patient's heart, wherein the programmed duration is approximately 5-120 seconds.

 (Original) A method as recited in claim 32, wherein the detecting comprises monitoring the patient's position.

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- 34. (Original) A method as recited in claim 32, wherein the detecting comprises monitoring patient activity.
- 35. (Original) A method as recited in claim 32, further comprising subsequently increasing pacing after the programmed duration expires.
 - 36. (Previously Cancelled)